

## Declaration/Power Of Attorney for Utility or Design Patent Application

**DECLARATION/  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION**

Declaration Submitted With Initial Filing (37 CFR 1.63)

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Supplemental Declaration (37 CFR 1.67)

Attorney Docket Number:	RCHP-137US
First Named Inventor:	Frank KO
<b>COMPLETE IF KNOWN</b>	
Application Number:	10/589,711
Filing Date:	June 18, 2007
Art Unit:	3738
Examiner Name:	To Be Assigned

## I hereby declare that:

Each Inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the Inventor(s) named below to be the original and first Inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GENE AND CELL DELIVERY SELF EXPANDING POLYMER STENTS

(Title of the Invention)

the specification of which

is attached hereto

**OR**

was filed on (MM/DD/YYYY) April 16, 2004 as United States Application or PCT International Application Number PCT/US2004/011794 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

**Authorization To Permit Access To Application by Participating Offices**

If checked, the undersigned hereby grants the USPTO authority to provide the European Patent Office (EPO), the Japan Patent Office (JPO), and any other intellectual property offices in which a foreign application claiming priority to the above-identified application is filed access to the above-identified patent application. See 37 CFR 1.14(c) and (h). This box should not be checked if the applicant does not wish the EPO, JPO, or other intellectual property office in which a foreign application claiming priority to the above-identified application is filed to have access to the application.

In accordance with 37 CFR 1.14(h)(3), access will be provided to a copy of the application-as-filed with respect to: 1) the above-identified application, 2) any foreign application to which the above-identified application claims priority under 35 USC 119(a)-(d) if a copy of the foreign application that satisfies the certified copy requirement of 37 CFR 1.55 has been filed in the above-identified US application, and 3) any U.S. application from which benefit is sought in the above-identified application.

In accordance with 37 CFR 1.14(c), access may be provided to information concerning the date of filing the Authorization to Permit Access to Application by Participating Offices.

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, Inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, Inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby appoint:

**Practitioners at Customer Number 23122**

**OR**

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to:	<input checked="" type="checkbox"/> Practitioners Customer Number listed above; <b>OR</b>	
	<input type="checkbox"/> Correspondence Address Below	

Name:

Address:

City:	State:	Zip:
Country:	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## Declaration/Power Of Attorney for Utility or Design Patent Application

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned Inventor.	
Given Name (first and middle (if any))  Frank		Family Name or Surname  Ko	
Inventor's Signature <i>Am. Ko</i>		Date: September 30, 08	
Residence: City: Philadelphia	State: PA	Country: USA	Citizenship: USA
Mailing Address: 5444 Castor Avenue - 3272 West 33rd Ave			
Mailing Address:			
City: Philadelphia Vancouver		State: PA BC	Zip: 19124 VGN 2G9
<b>Name of Second Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned Inventor.	
Given Name (first and middle (if any))  Robert J.		Family Name or Surname  Levy	
Inventor's Signature		Date: _____	
Residence: City: Merion Station	State: PA	Country: USA	Citizenship: USA
Mailing Address: 440 Merion Road			
Mailing Address:			
City: Merion Station		State: PA	Zip: 19066
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned Inventor.	
Given Name (first and middle (if any))  Ivan		Family Name or Surname  Aiferlev	
Inventor's Signature		Date: _____	
Residence: City: Clementon	State: NJ	Country: USA	Citizenship: RU
Mailing Address: 1341 Blackwood Clementon Road #963			
Mailing Address:			
City: Clementon		State: NJ	Zip: 0821
<input checked="" type="checkbox"/> Additional Inventors are listed on the next page.			

## Declaration/Power Of Attorney for Utility or Design Patent Application

<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Illa		Fishbein	
Inventor's Signature		Date: _____	
Residence: City: Philadelphia	State: PA	Country: USA	Citizenship: JL
Mailing Address: 450 Byberryf Road #T-21			
Mailing Address:			
City: Philadelphia	State: PA	Zip: 19116	Country: USA
<input type="checkbox"/> Additional inventors are listed on _____ Supplemental Sheet(s).			